

County: Monroe  
SPARTA NURSING HOME  
310 WEST MAIN STREET

SPARTA 54656 Phone: (608) 269-2132

Operated from 1/1 To 12/31 Days of Operation: 366

Operate in Conjunction with Hospital? Yes

Number of Beds Set Up and Staffed (12/31/00): 30

Total Licensed Bed Capacity (12/31/00): 30

Number of Residents on 12/31/00: 30

Facility ID: 8480

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Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified?

Average Daily Census:

Non-Profit Church Related

Skilled

No

Yes

30

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/00)				Length of Stay (12/31/00)	
		Primary Diagnosis	%	Age Groups	%		%
Home Health Care	No					Less Than 1 Year	33.3
Supp. Home Care-Personal Care	No					1 - 4 Years	30.0
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	0.0	More Than 4 Years	36.7
Day Services	No	Mental Illness (Org./Psy)	16.7	65 - 74	6.7		
Respite Care	No	Mental Illness (Other)	3.3	75 - 84	23.3		100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	53.3	*****	
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	16.7	Full-Time Equivalent	
Congregate Meals	No	Cancer	0.0			Nursing Staff per 100 Residents	
Home Delivered Meals	No	Fractures	6.7		100.0	(12/31/00)	
Other Meals	No	Cardiovascular	16.7	65 & Over	100.0		
Transportation	No	Cerebrovascular	6.7			RNs	10.9
Referral Service	No	Diabetes	10.0	Sex	%	LPNs	5.0
Other Services	No	Respiratory	0.0			Nursing Assistants	
Provide Day Programming for		Other Medical Conditions	40.0	Male	6.7	Aides & Orderlies	
Mentally Ill	No			Female	93.3		
Provide Day Programming for			100.0				
Developmentally Disabled	No				100.0		

#### Method of Reimbursement

Level of Care	Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Managed Care			Percent Of All Residents
	No.	%	Per Diem Rate	No.	%	Per Diem Rate	No.	%	Per Diem Rate	No.	%	Per Diem Rate	No.	%	Per Diem Rate	Total No.
Int. Skilled Care	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0
Skilled Care	1	100.0	\$177.73	15	71.4	\$107.90	0	0.0	\$0.00	6	75.0	\$127.00	0	0.0	\$0.00	22
Intermediate	---	---	---	6	28.6	\$88.30	0	0.0	\$0.00	2	25.0	\$123.00	0	0.0	\$0.00	8
Limited Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0
Personal Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0
Residential Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0
Dev. Disabled	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0
Traumatic Brain Inj.	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0
Ventilator-Dependent	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0
Total	1	100.0		21	100.0		0	0.0		8	100.0		0	0.0		30

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/00				
		Activities of	%	% Needing Assistance of	% Totally	Total
		Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Percent Admissions from:						
Private Home/No Home Health	4.8	Bathing	0.0	50.0	50.0	30
Private Home/With Home Health	0.0	Dressing	36.7	30.0	33.3	30
Other Nursing Homes	14.3	Transferring	43.3	20.0	36.7	30
Acute Care Hospitals	76.2	Toilet Use	40.0	23.3	36.7	30
Psych. Hosp. -MR/DD Facilities	0.0	Eating	70.0	13.3	16.7	30
Rehabilitation Hospitals	0.0	*****				
Other Locations	4.8	Continence				
Total Number of Admissions	21	Indwelling Or External Catheter	3.3	Special Treatments		%
Percent Discharges To:		Occ/Freq. Incontinent of Bladder	26.7	Receiving Respiratory Care		0.0
Private Home/No Home Health	19.0	Occ/Freq. Incontinent of Bowel	10.0	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	4.8			Receiving Suctioning		0.0
Other Nursing Homes	0.0	Mobility		Receiving Ostomy Care		6.7
Acute Care Hospitals	0.0	Physically Restrained	0.0	Receiving Tube Feeding		0.0
Psych. Hosp. -MR/DD Facilities	0.0			Receiving Mechanically Altered Diets		43.3
Rehabilitation Hospitals	0.0	Skin Care		Other Resident Characteristics		
Other Locations	9.5	With Pressure Sores	6.7	Have Advance Directives		93.3
Deaths	66.7	With Rashes	0.0	Medications		
Total Number of Discharges				Receiving Psychoactive Drugs		46.7
(Including Deaths)	21			*****		

Selected Statistics: This Hospital-Based Facility Compared to Similar Facilities & Compared to All Facilities

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	This Facility	Other Hospital-Based Facilities		All Facilities	
	%	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	100.0	87.5	1.14	84.5	1.18
Current Residents from In-County	100.0	83.6	1.20	77.5	1.29
Admissions from In-County, Still Residing	47.6	14.5	3.29	21.5	2.21
Admissions/Average Daily Census	70.0	194.5	0.36	124.3	0.56
Discharges/Average Daily Census	70.0	199.6	0.35	126.1	0.56
Discharges To Private Residence/Average Daily Census	16.7	102.6	0.16	49.9	0.33
Residents Receiving Skilled Care	73.3	91.2	0.80	83.3	0.88
Residents Aged 65 and Older	100.0	91.8	1.09	87.7	1.14
Title 19 (Medicaid) Funded Residents	70.0	66.7	1.05	69.0	1.01
Private Pay Funded Residents	26.7	23.3	1.14	22.6	1.18
Developmentally Disabled Residents	0.0	1.4	0.00	7.6	0.00
Mentally Ill Residents	20.0	30.6	0.65	33.3	0.60
General Medical Service Residents	40.0	19.2	2.08	18.4	2.17
Impaired ADL (Mean) *	49.3	51.6	0.96	49.4	1.00
Psychological Problems	46.7	52.8	0.88	50.1	0.93
Nursing Care Required (Mean) *	7.1	7.8	0.91	7.2	0.99